

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   |          |        |         |
| O.I.P.E. CLASSIFIER |          | 6      | 3-16-99 |
| FORMALITY REVIEW    |          |        |         |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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